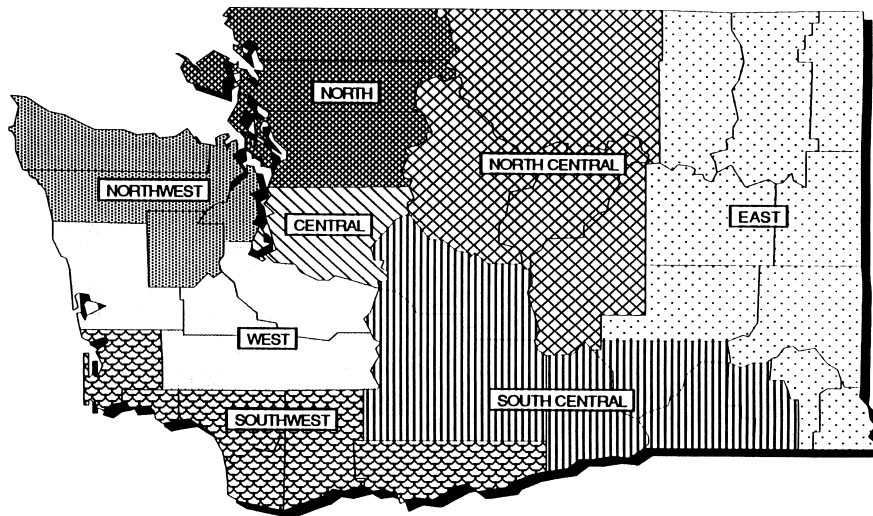


REGIONAL SUPPORT ACTIVITIES



A Process Handbook for Regional EMS and Trauma Care System Improvement



*Health Systems Quality Assurance
Office of Emergency Medical and Trauma Prevention
Education, Training and Regional Support Section
P.O. Box 47853
Olympia, Washington 98504-7853
(360) 705-6716 or (800) 458-5281, Ext. 2 (in-state only)*

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INTRODUCTION

“What do we have to do in order to.....?”

Have you ever had a question about how regional council appointments are made? Ever wonder how you would go about getting changes made to your regional plan, or regional Patient Care Procedures? Do you think the state trauma triage tool needs to have something added to it?

These system questions, and others like them, come up from time to time. Previously, you might have had to call your regional council office or Olympia to find out how a particular process worked. Now, however, you can refer to this document, which is intended to answer your regional support questions and provide information on “how do we...” or “how does DOH...” questions.

This document is a flow chart designed to show how each “regional system” process works, who the major players are, what needs to be done first, what the next steps are, and what the final result of the process will be. Fifteen separate processes are outlined step-by-step as a flow chart, with a descriptive paragraph regarding each process. There is a process flow chart for the examples above, in addition to other topics such as the regional data submission process, contract development, and regional plan review and approval.

Understanding these different regional system processes and how they work will provide useful information for regional and local EMS chairs, regional and county EMS staff members, County Medical Program Directors, Steering Committee members and others directly involved in the administration and operation of the Washington State EMS and trauma system. We hope this document will provide better insight, understanding and participation in all the regional system processes, and consequently, lead to more efficient EMS and trauma system management and oversight across Washington State.

*This document is also available on our website at **www.doh.wa.gov/hsqa/emtp***



If you have any thoughts or suggestions about improving, simplifying or adding to any of the processes listed here, please e-MAIL them to us at:

dag0303@doh.wa.gov

or contact us at any of the numbers listed on the cover of this document.

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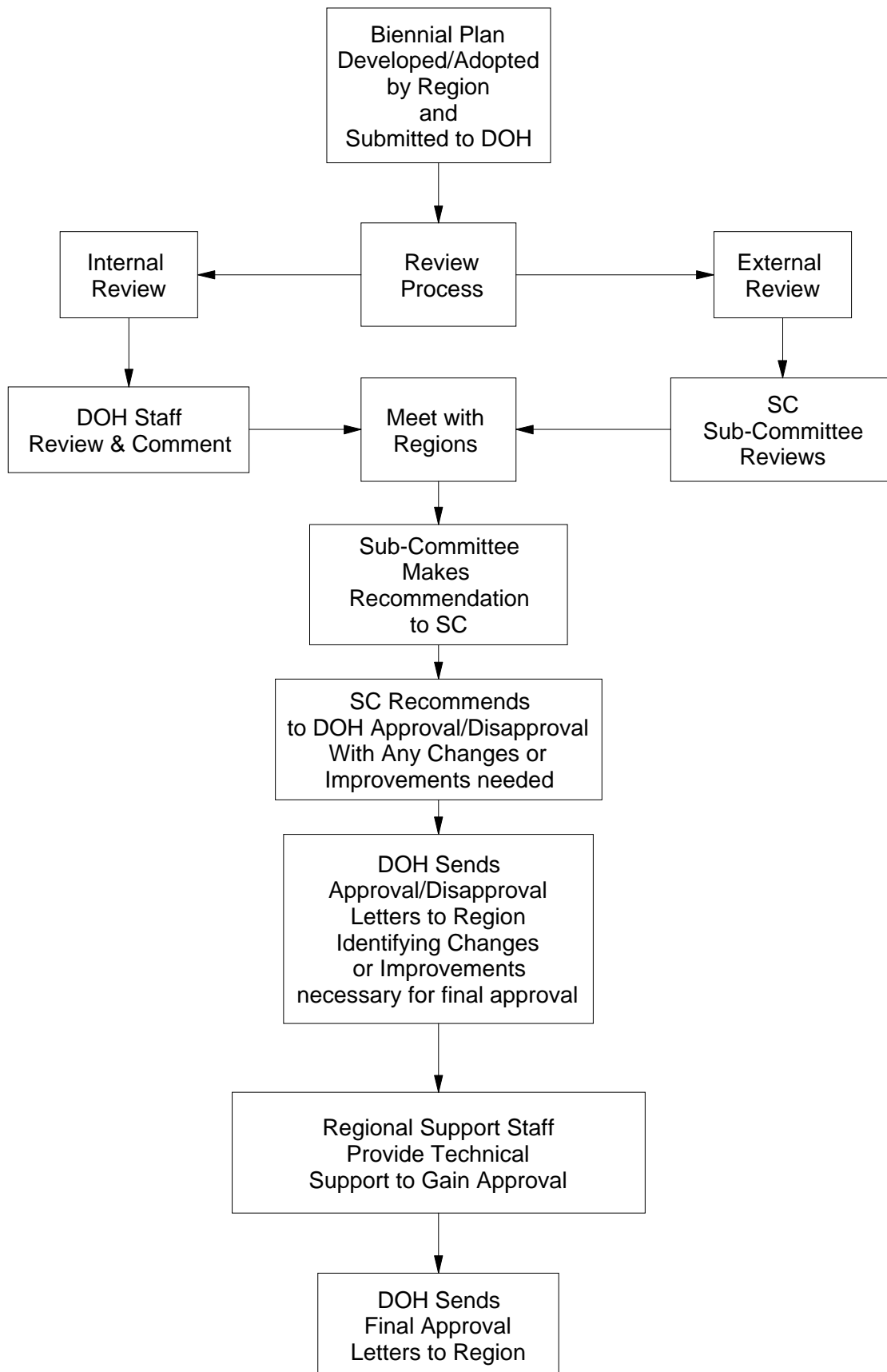
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BIENNIAL PLAN REVIEW & APPROVAL PROCESS

Regional councils must use the Biennial Plan Format provided by DOH to develop a Biennial Plan. They must adopt and submit their Biennial Plans to DOH by June 30 of odd-numbered years.

- Step #1** Review of each regional plan is conducted on both an internal and external track, with Department of Health (DOH) staff providing the internal review, and a subcommittee appointed by the EMS and Trauma Care Steering Committee (SC) providing the external review.
- Step #2** Comments from the DOH staff review are passed along to both the region and the SC Subcommittee. The SC Subcommittee meets with DOH staff and the regional chairs and staff to complete the plan review.
- Step #3** DOH then notifies the regions in writing regarding comments and suggestions made by DOH staff and the SC subcommittee in regard to the submitted plan content.
- Step #4** The plans are revised accordingly, and the SC Subcommittee makes recommendation to the SC.
- Step #5** The SC makes a recommendation to DOH on the approval/disapproval of the plan, including suggestions for changes and improvements in the plan. DOH then notifies the regions regarding their plan approval/disapproval, and outlines changes, if any, which need to be made in the regional plan prior to final DOH approval of the regional plan.

BIENNIAL PLAN REVIEW & APPROVAL PROCESS

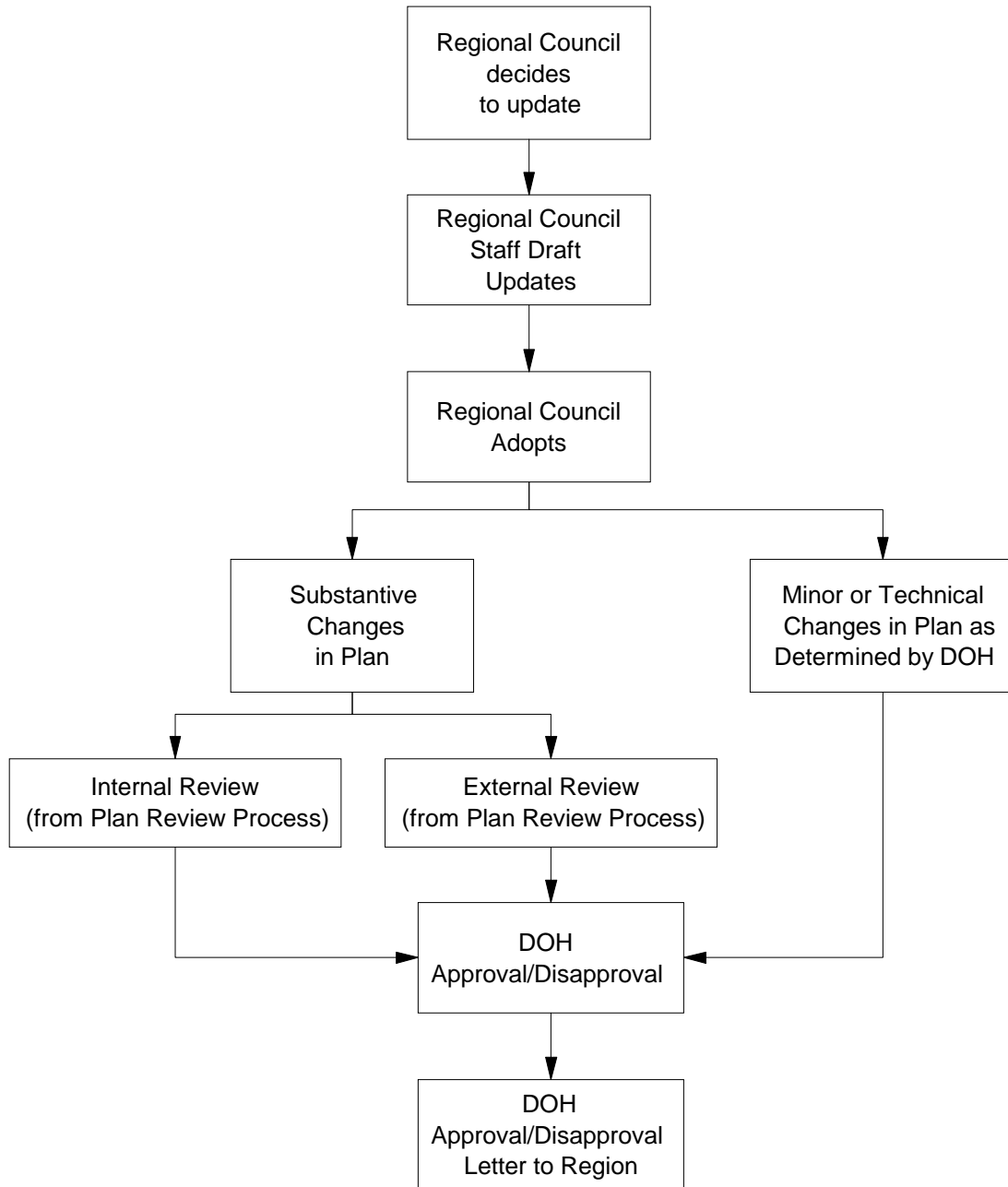


REGIONAL BIENNIAL PLAN UPDATE PROCESS

Regional councils may revise and/or update their approved regional EMS and Trauma Care (EMS/TC) Biennial Plan as needed. Such updates may be made at any time and contain minor changes and technical clarification to the plan.

- Step #1** A regional council can determine that a portion of the current approved regional plan needs to be updated.
- Step #2** Regional staff, at regional council direction, drafts an update of that portion of the plan, which is subsequently adopted by the regional council.
- Step #3** The updated portion of the plan is submitted to DOH for approval.
- Step #4** If the proposed changes are minor or provide technical clarification, the DOH Regional Support staff will review and approve or disapprove the proposed changes.
- Step #5** If the proposed changes are other than minor and technical, the two-track process for plan review will be initiated, wherein DOH staff and SC Subcommittee review the proposed changes, and the SC makes a recommendation to DOH regarding approval/disapproval of the proposed changes.

REGIONAL BIENNIAL PLAN UPDATE PROCESS

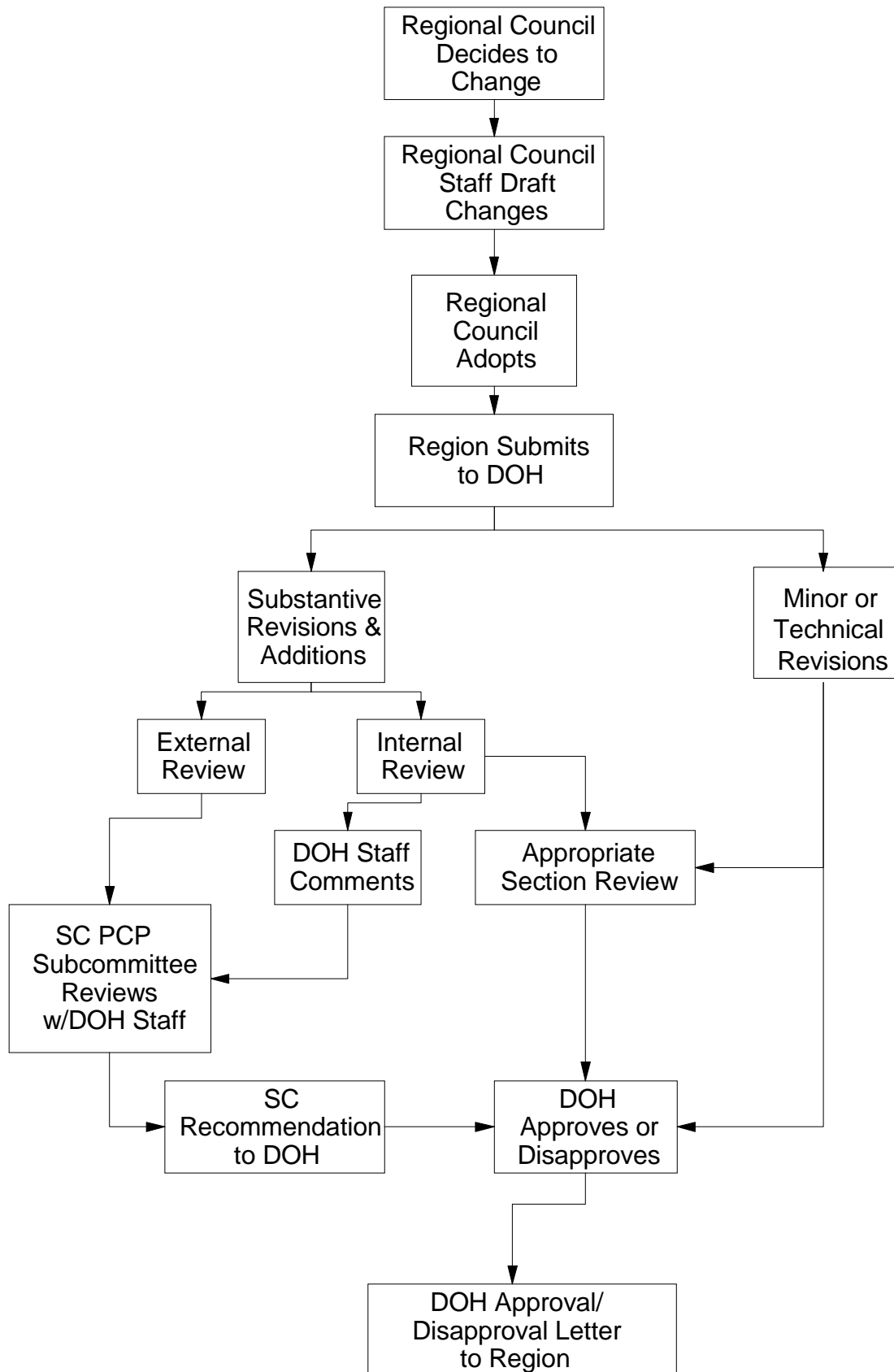


PCP ADDITIONS, UPDATES & REVISIONS PROCESS

All regions currently have regional council-adopted and DOH-approved regional Patient Care Procedures (PCPs). Revisions or additions to these DOH-approved PCPs may be made.

- Step #1** Regional council determines regional PCPs should be added, updated or revised.
- Step #2** Regional council staff may draft changes after consulting with regional council members and DOH staff as necessary.
- Step #3** Regional council may adopt PCP changes and submit to DOH for approval.
- Step #4** If proposed changes are minor or technical in nature, DOH staff will review and approve or disapprove the proposed changes in writing.
- Step #5** If the proposed changes are substantive or a new PCP, DOH staff will review and provide a SC PCP review subcommittee with comments on the proposed changes.
- Step #6** The SC subcommittee will review the proposed changes and report back to the SC regarding recommendation for approval or disapproval of the proposed changes.
- Step #7** The SC will provide a recommendation to DOH, which will then approve or disapprove the proposed changes in writing to the region.

PCP ADDITIONS, UPDATES & REVISIONS PROCESS

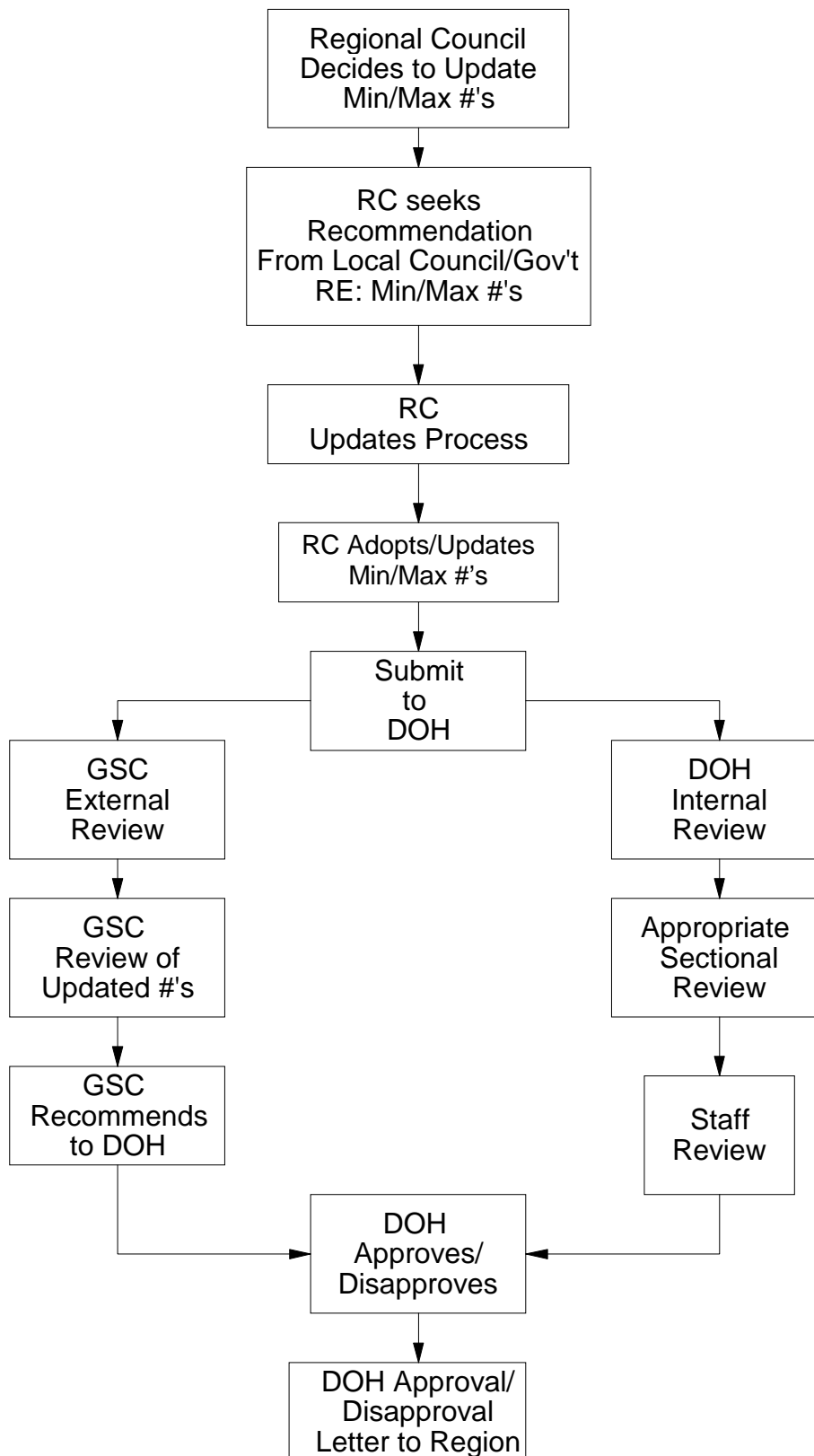


VERIFIED PREHOSPITAL SERVICES MIN/MAX NUMBERS PROCESS

Regional minimum/maximum (min/max) numbers shall be found in the most current DOH-approved Regional Plan. Regional Councils shall seek recommendations from local EMS/TC Councils and local government regarding min/max numbers.

- Step #1** Regional Council determines it should update prehospital verified services min/max numbers.
- Step #2** Regional council updates min/max numbers and adopts them for inclusion in the regional plan.
- Step #3** Updated regional plan is submitted to DOH for approval.
- Step #4** DOH staff will review plan and provide the SC plan review subcommittee with comments on the proposed changes.
- Step #5** The SC subcommittee will review the proposed changes and report back to the SC regarding a recommendation for approval or disapproval of the proposed changes in min/max numbers.
- Step #6** The SC provides recommendation to DOH regarding the approval or disapproval of min/max numbers.
- Step #7** DOH sends approval/disapproval letter to the region.

VERIFIED PREHOSPITAL SERVICES MIN/MAX #'S

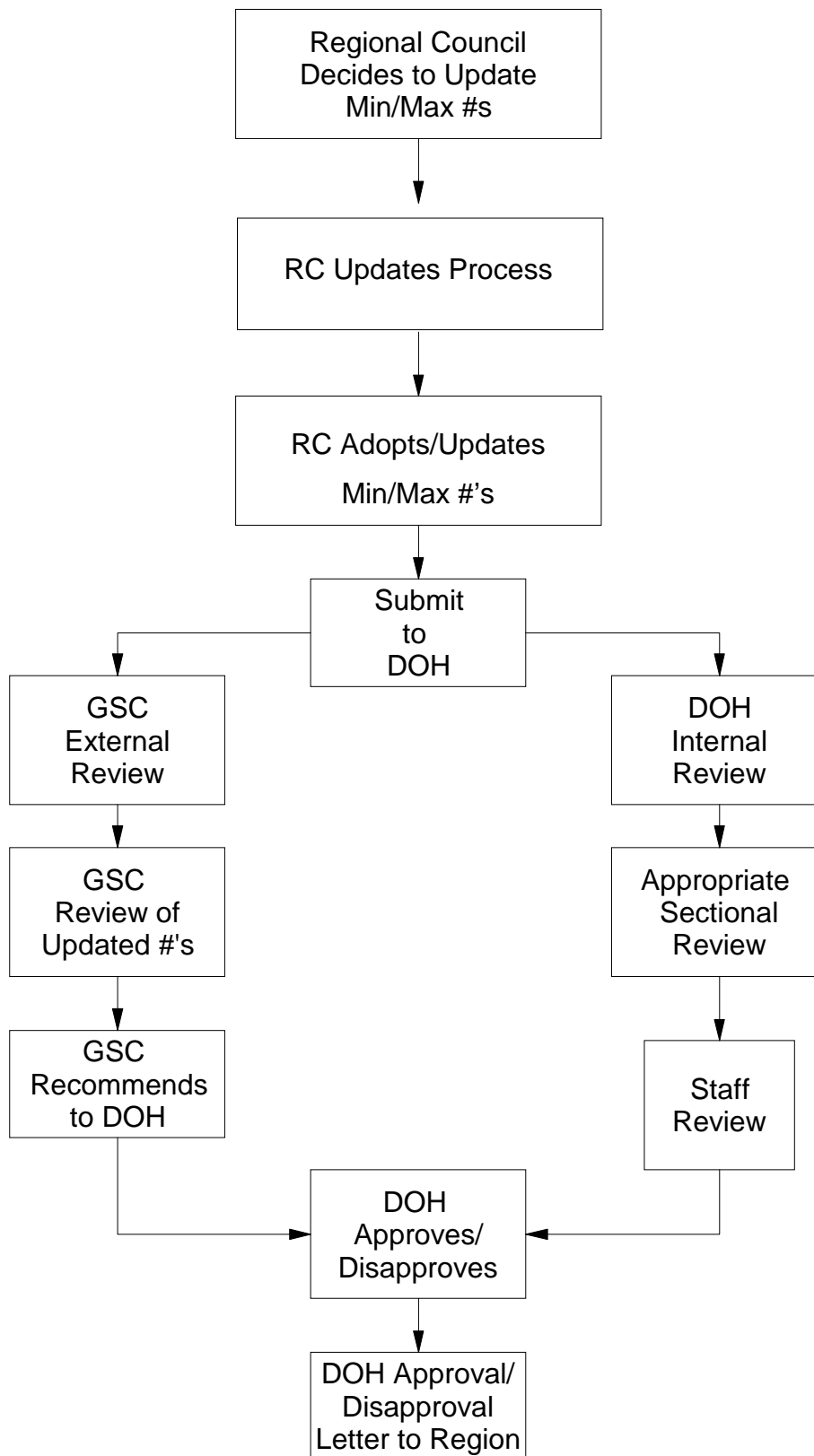


DESIGNATED TRAUMA/REHABILITATION FACILITIES MIN/MAX #'s

Regional min/max numbers shall be found in the DOH-approved Regional Plan.

- Step #1** Regional Council determines it should update designated trauma/rehabilitation min/max numbers.
- Step #2** Regional council updates min/max numbers and adopts them for inclusion in the regional plan.
- Step #3** Updated regional plan is submitted to DOH for approval.
- Step #4** DOH staff will review plan and provide the SC subcommittee with comments on the proposed changes.
- Step #5** The SC subcommittee will review the proposed changes and report back to the SC regarding a recommendation for approval or disapproval of the proposed changes in min/max numbers.
- Step #6** The SC will provide recommendation to DOH regarding the approval or disapproval of min/max numbers.
- Step #7** DOH sends approval/disapproval letter to the region.

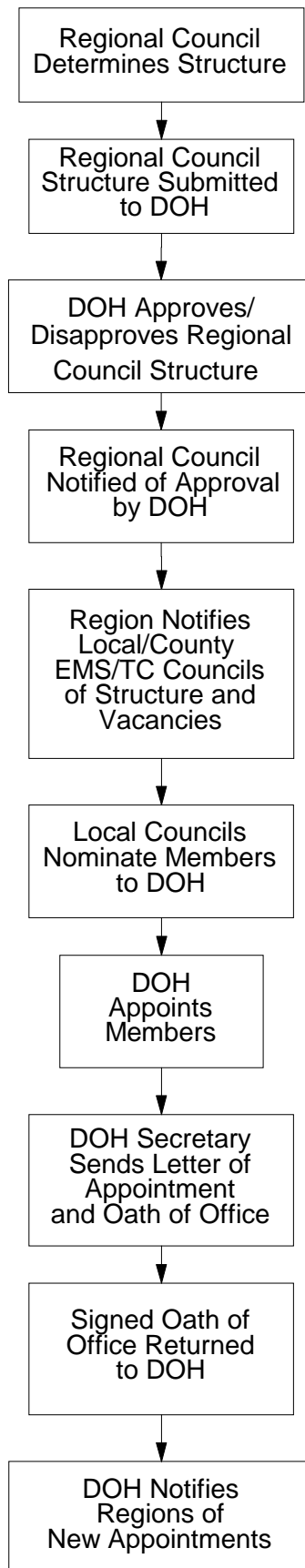
DESIGNATED TRAUMA/REHAB FACILITIES MIN/MAX #'s PROCESS



COUNCIL MEMBERSHIP PROCESS

- Step #1** Regional council determines its structure, consistent with RCW 70.168.120(2), and submits proposal to DOH for approval.
- Step #2** DOH approves or disapproves the proposed structure and notifies the region.
- Step #3** If approved, the region notifies local/county EMS/TC councils regarding the structures of the regional EMS/TC council and advises them of all vacancies on the councils.
- Step #4** Local and county councils make nominations to DOH for representatives on the regional EMS/TC council.
- Step #5** DOH appoints representatives to the regional council and sends letter of appointment and oath of office to newly appointed member.
- Step #6** Member signs the oath and returns it to DOH.
- Step #7** DOH notifies the regional council of the new appointment.

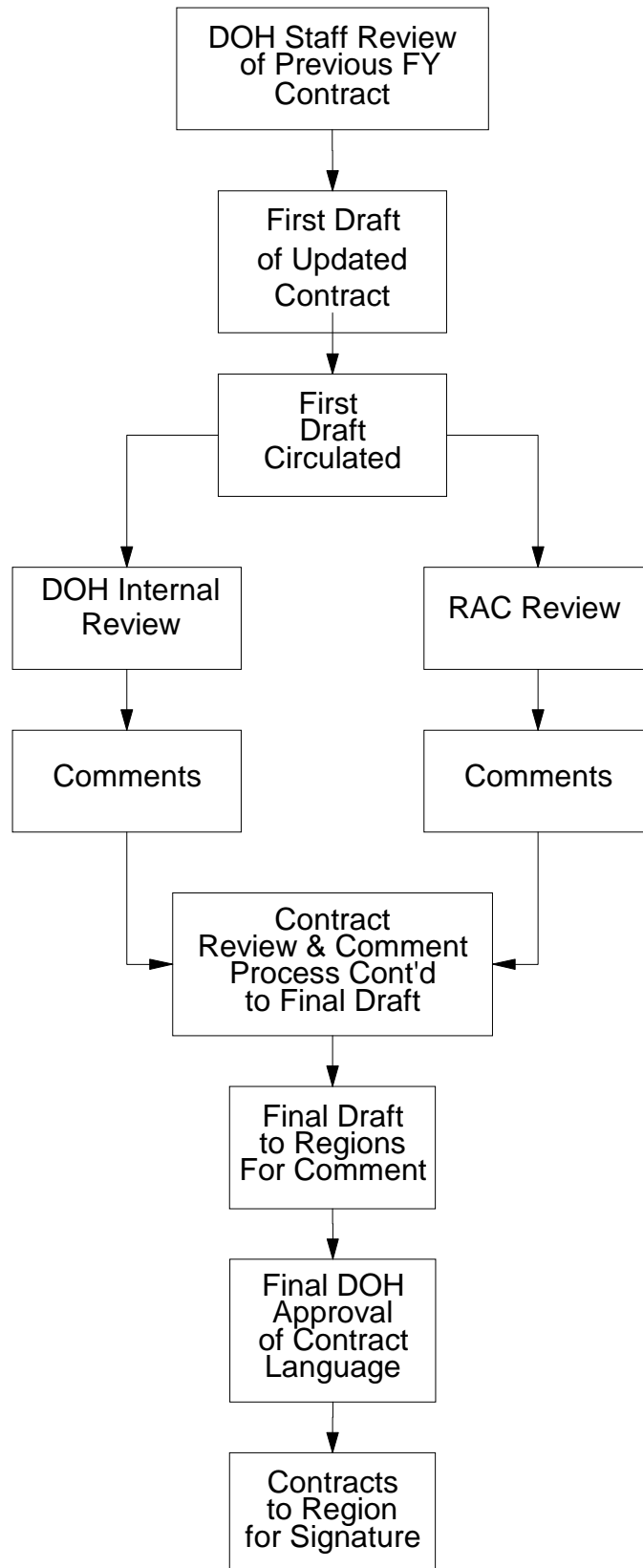
COUNCIL MEMBERSHIP PROCESS



CONTRACT DEVELOPMENT PROCESS

- Step #1** DOH staff review previous contract and draft updated version.
- Step #2** Draft contract circulated among DOH staff and to Regional Advisory Committee (RAC) members.
- Step #3** DOH staff and RAC members provide comments and suggestions regarding content of contract. Review and comment process continues until final draft contract.
- Step #4** DOH staff meet with each Regional Council to develop the specific contract language for that region.
- Step #5** DOH approves final contract language and inserts final regional funding amounts.
- Step #6** Contracts are sent to regional councils for regional Chair/President signature, and returned to DOH for processing and signature by DOH Contracts Officer.

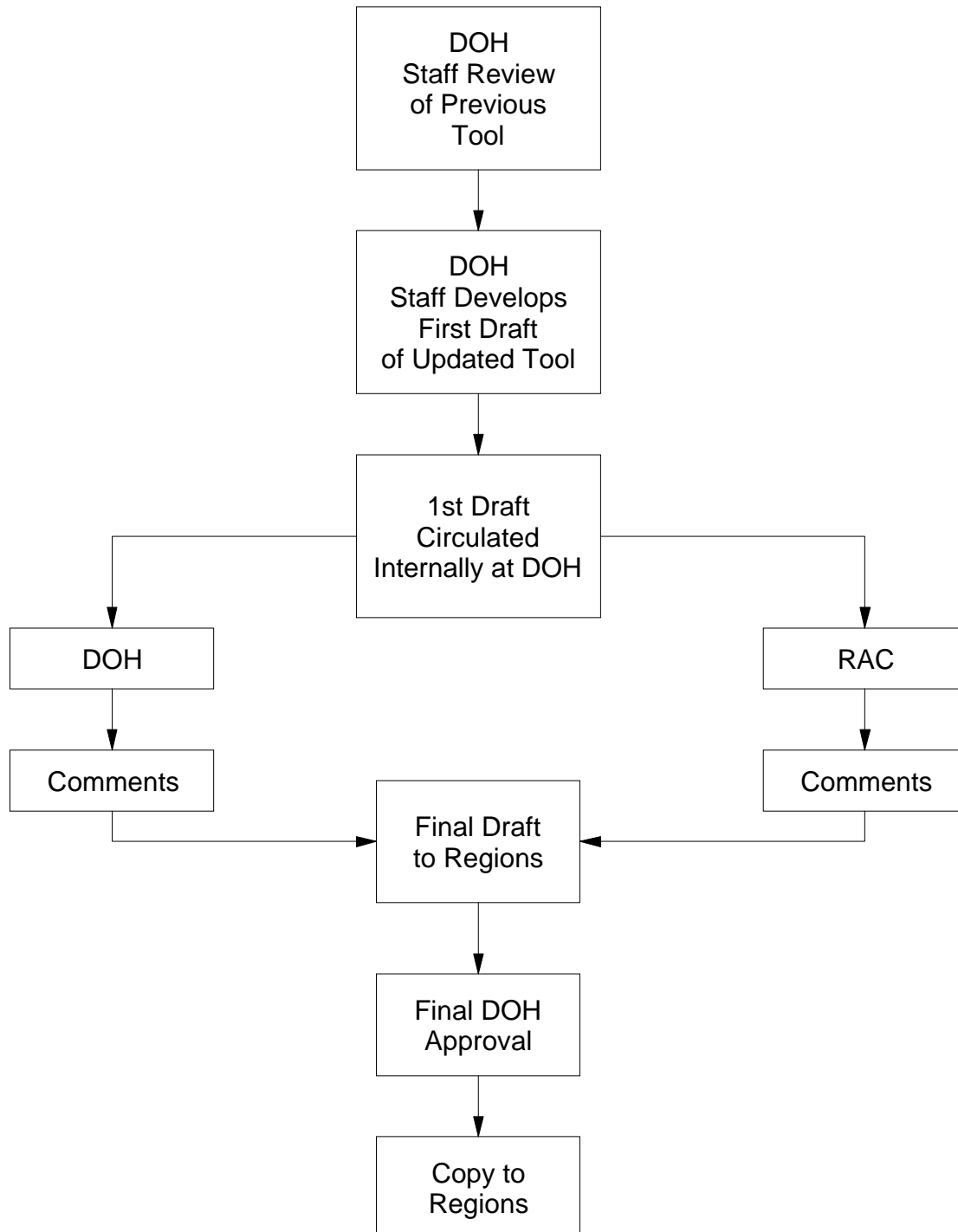
CONTRACT DEVELOPMENT PROCESS



BIENNIAL PLAN EVALUATION TOOL DEVELOPMENT PROCESS

- Step #1** DOH staff review previous plan evaluation tool and develop draft updated tool based on current plan format.
- Step #2** Draft tool is circulated to DOH staff and to RAC members.
- Step #3** Final comments are incorporated into draft and final draft is circulated to DOH staff and to RAC members.
- Step #4** DOH approves final plan evaluation tool and tool is circulated to regions and SC plan review subcommittee.

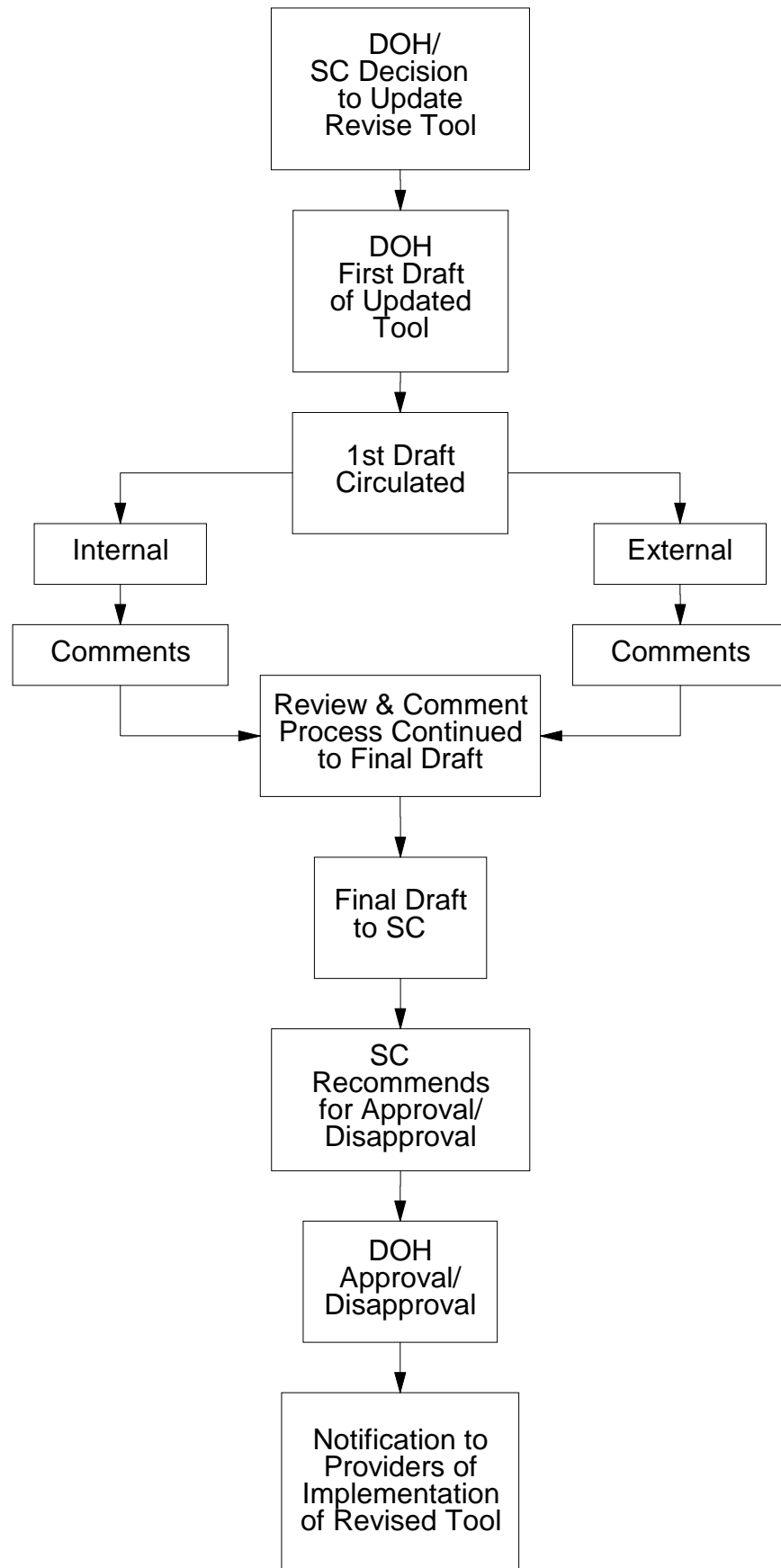
BIENNIAL PLAN EVALUATION TOOL DEVELOPMENT PROCESS



TRAUMA TRIAGE TOOL (TTT) REVISION PROCESS

- Step #1** SC recommendation/DOH decision to revise the TTT.
- Step #2** Based on SC discussions on content of revised TTT, DOH drafts revised TTT.
- Step #3** Revised draft TTT is circulated internally in DOH for review and comment, as well as to SC members, and to the EMS/TC community statewide.
- Step #4** The review and comment process continues, focused at the SC level, until formal SC recommendation to DOH on TTT revision occurs.
- Step #5** DOH then approves the revised TTT, and notifies state EMS/TC providers concerning implementation of the revised TTT.

TRAUMA TRIAGE TOOL REVISION PROCESS



DATA SUBMISSION PROCESS

Prehospital agencies own their own data and are required to submit their agency data to DOH.

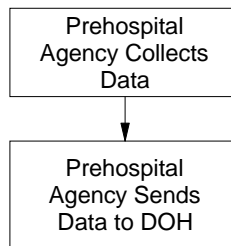
MAIN PROCESS: Agency submits data directly to DOH.

ALTERNATE PROCESS: Agencies may choose to have a vendor or another entity collect their data and submit it to DOH.

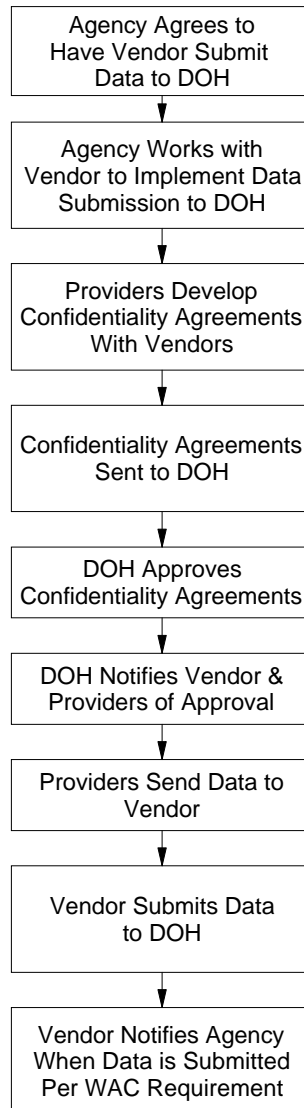
- Step #1** DOH works with provider agencies to implement agency data submission, including developing a confidentiality agreement between agencies and the vendor or other entity.
- Step #2** Confidentiality agreement is submitted to DOH for approval.
- Step #3** DOH then notifies both the provider agencies and the vendor of DOH approval of confidentiality agreement, and agency data submission to the vendor begins.
- Step #4** The vendor then begins to submit data collected to DOH on a regular basis, per the data submission requirements adopted by DOH.
- Step #5** Vendor notifies agency when their data has been submitted to document meeting WAC requirement.

DATA SUBMISSION PROCESS

MAIN METHOD



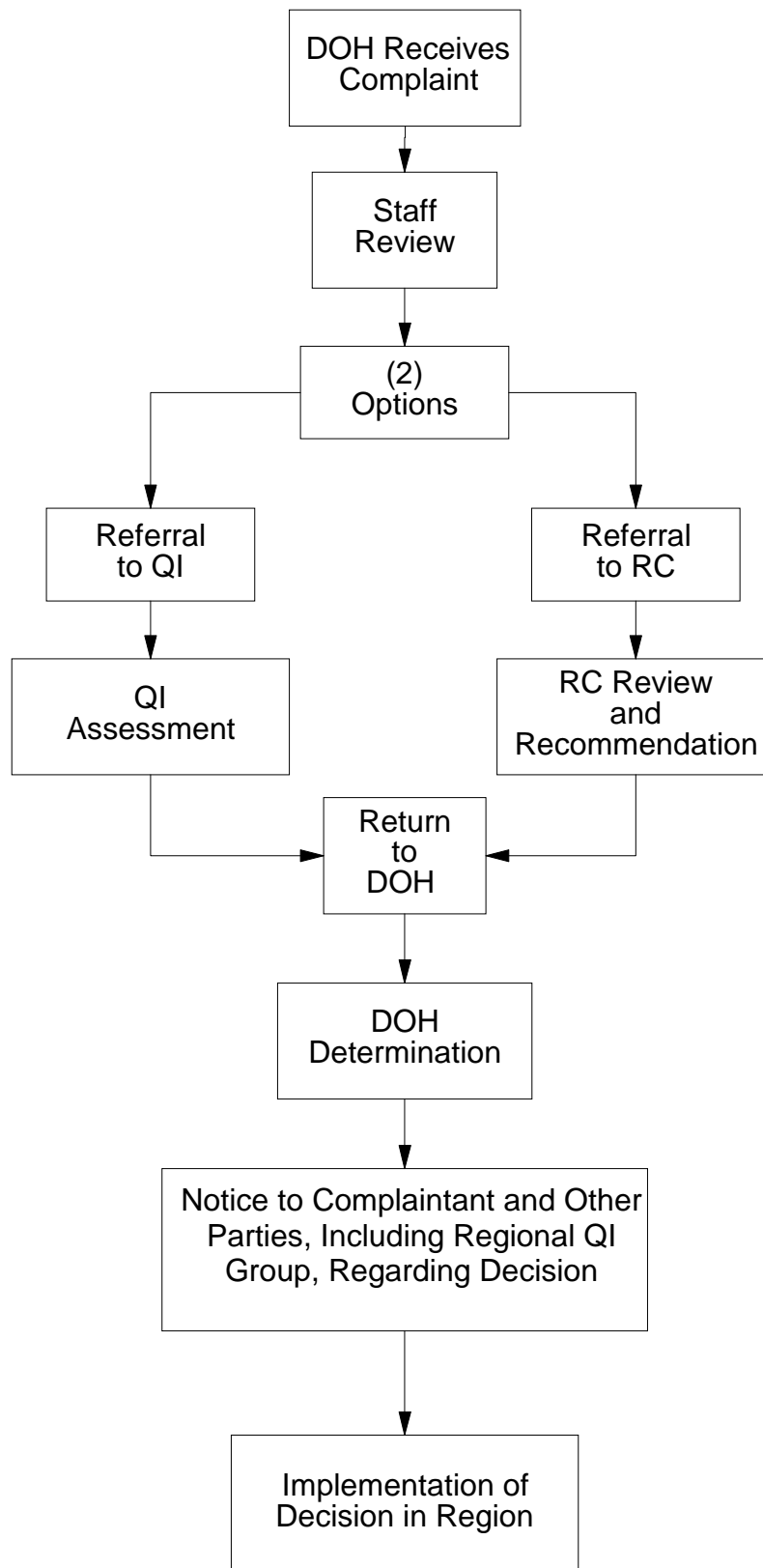
ALTERNATE METHOD



RESOLUTION OF NON-DISCIPLINARY COMPLAINTS PROCESS REGARDING PATIENT CARE PROCEDURES (PCPs)

- Step #1** DOH receives a complaint concerning patient care, as that care is provided under the auspices of the DOH-approved regional PCPs.
- Step #2** DOH staff review the complaint, and if appropriate, refer the complaint to the Regional QI group regarding patient care, or to the regional council regarding system issues. The next steps for these options are:
- A. Regarding patient care or patient outcome issues, the regional QI conducts an assessment of the complaint. When the regional QI assessment has been completed, that assessment is forwarded to the regional council along with any appropriate recommendation. The regional council then reviews the QI assessment and recommendation, if any, and forwards the assessment and recommendation to DOH.
 - B. Regarding system issues, the regional council conducts an assessment of the complaint. That assessment, together with any appropriate recommendation, is forwarded to DOH.
- Step #3** DOH makes a determination regarding the complaint and notifies parties involved, including the regional QI group.
- Step #4** DOH determination is implemented within the region.

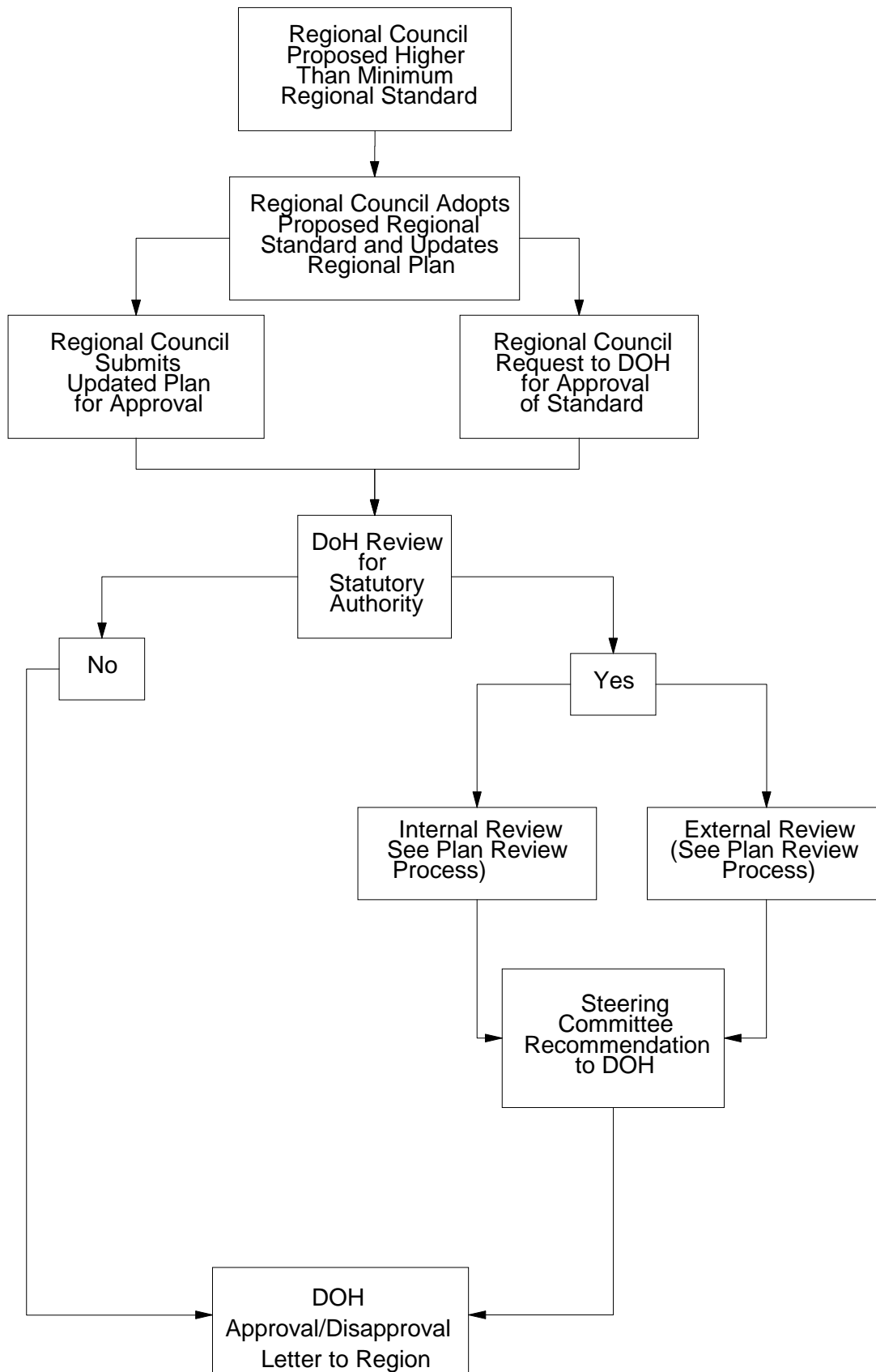
RESOLUTION OF COMPLAINTS PROCESS RE: PATIENT CARE PROCEDURES



HIGHER-THAN-MINIMUM REGIONAL STANDARDS APPROVAL PROCESS

- Step #1** The Regional Council believes that the region should adopt a higher-than-minimum EMS and trauma regional care standard, in an area in which a state minimum EMS and trauma care standard currently exists.
- Step #2** The Regional Council adopts the higher regional standard and updates the regional plan to reflect this higher standard.
- Step #3** The updated portion of the regional plan is submitted to DOH for approval, along with a separate written request for DOH formal approval of this higher regional standard for implementation within the region. This request includes the specific wording proposed to replace a current state minimum standard.
- Step #4** DOH reviews the proposed standard for statutory authority. If statutory authority exists, the external and internal review processes are initiated. If no statutory authority exists, DOH notifies the region and the approval process is terminated.
- Step #5** DOH utilizes the external and internal plan review process tracks from Process (I), Regional Plan Review and Approval Process, for review purposes.
- Step #6** At the end of the Review and Approval Process the Steering Committee makes a recommendation to DOH regarding the approval or disapproval of the proposed higher regional standard.
- Step #7** Based on this recommendation and its own internal review, DOH then formally approves or disapproves of the implementation of proposed higher regional standard within the region.

HIGHER-THAN-MINIMUM REGIONAL STANDARDS APPROVAL PROCESS



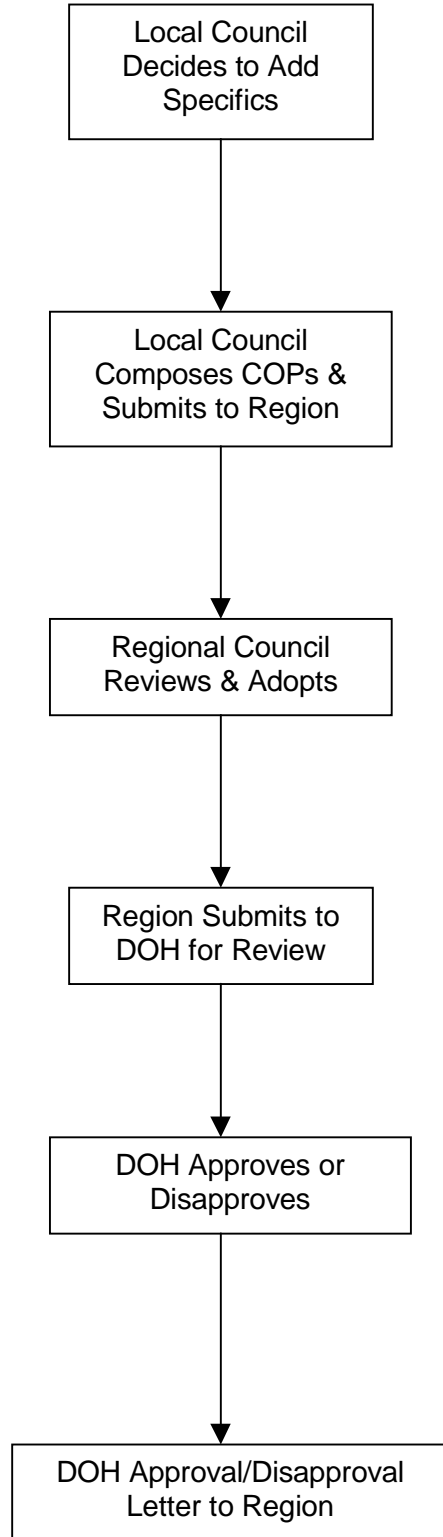
COUNTY OPERATING PROCEDURES (COPs) PROCESS

Counties may compose specifics that clarify how DOH-approved regional Patient Care Procedures (PCPs) are implemented or made operational within their county. These COPs may then be adopted by the regional council and included as addendums to their DOH-approved PCPs. These COPs may be updated or revised whenever necessary, in accordance with the following:

- Step #1** Local council determines COPs are needed or should be updated or revised.
- Step #2** Local council should compose draft COPs language and submit to Regional Council for review and adoption.
- Step #3** Regional council reviews COPs language for consistency with approved PCPs, adopts them as an addendum to their approved regional PCPs, and submits them to DOH for final approval.
- Step #4** DOH staff will review and approve or disapprove the proposed COPs as addendums to the regional PCPs in writing to the region and the county.

New Process Added 1/13/99

COUNTY OPERATING PROCEDURES (COPS) PROCESS



CONFLICT RESOLUTION PROCESS

Define The Problem

- Step #1** Do you share common goals in solving the problem?
- Step #2** Is there a quality requirement that has to be kept in mind in solving the problem?
- Step #3** Do all parties agree to go with the consensus opinion/decision?
- Step #4** Has this problem been considered already and if so, what was the decision?
- Step #5** Do we have sufficient information in order to make a quality decision (i.e., has an expert been consulted)?



Questions

- Step #1** Is it in Statute?
- Step #2** Is it in WAC?
- Step #3** Is it in the Regional Plan?
- Step #4** Is it in Policy?
- Step #5** Is it in Contract?
- Step #6** What does the Statute/WAC/Policy/Contract say?
- Step #7** Is it a local, region or state issue?
- Step #8** Does it have statewide impact?
- Step #9** Is there a quality requirement of such that one solution is likely to be more rational than another?
- Step #10** Is it necessary for all parties involved to agree to the "solution"?
- Step #11** Has this problem been considered by the appropriate committees? If so, what was the decision?
- Step #12** Is the problem clearly stated, and does everyone agree with the problem as stated?

NOTES:

THE FOUR STEPS OF PROBLEM SOLVING

- Step #1** Eliminate “false” conflicts: misunderstandings
- • Ask questions and clarify your assumptions about:
 - What the other person wants or doesn’t want
 - Their reasons for wanting or not wanting something
 - If you determine there is a true conflict of interests, go to Step 2
- Step #2** Analyze your issues and interests, as well as their issues and interests
- Discuss problems before solutions
 - Communicate what you want and why you want it
 - Make a list of your issues and interests, then prioritize
 - Express your perceptions and emotions
 - Encourage the other party to do the same
- Step #3** Find solutions for both parties
- First invent:
 - Brainstorm solutions together (suspend judgment)
 - Sit side-by-side
 - Then decide
 - Consult; don’t dictate
 - Be flexible on solutions and firm on interests
 - Stick to your primary interests
 - Look for integrative solutions
- Step #4** If Step #3 is not successful
- Recycle Steps #2 and 3
 - Persist until using a third party or walking away becomes a better choice
 - Put the agreement in writing and set a follow-up date

PROBLEM-SOLVING WORKSHEET

1. Describe the conflict.

Is this a true conflict, or is it a misunderstanding?

2. List your interests as well as the other party's interests, then prioritize.

| Your Interests | Other Party's Interests |
|----------------|-------------------------|
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3. List some possible solutions.

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